IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Hiroshi UENO

Title:

ATM MULTIPLEXING APPARATUS AND CELL **DISCARD METHOD**

Appl. No.:

(Unassigned)

Filing Date: December 28, 1999

Examiner:

(Unassigned)

Art Unit:

(Unassigned)



Assistant Commissioner for Patents Box PATENT APPLICATION Washington, D.C. 20231

Sir:

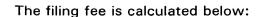
Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Hiroshi UENO

Enclosed are:

- [X] Specification, Claim(s), and Abstract (27 pages).
- [X] Formal drawings (11 sheets, Figures 1-11).
- [X] Declaration and Power of Attorney (2 pages).
- [X] Assignment of the invention to NEC CORPORATION.
- [X] Assignment Recordation Cover Sheet.
- [X] Claim for Convention Priority and Priority Document.
- [] Small Entity statement.
- [X] Information Disclosure Statement.
- [X] Form PTO-1449 with copies of 3 listed reference(s).





| | Claims as Filed | | Included in Basic Fee | 1 | Extra Claims | | Rate | | Fee Totals |
|--|--------------------|---|--------------------------|---|-----------------|--------|-----------|---------|---------------|
| Basic Fee | | | | | | | \$760.00 | | \$760.00 |
| Total Claims: | 9 | - | 20 | = | 0 | × | \$18.00 | = | \$0.00 |
| Independents: | 2 | - | 3 | = | 0 | - × | \$78.00 | = | \$0.00 |
| If any Multiple Dependent Claim(s) present: + \$260.00 | | | | | | | | = | \$0.00 |
| Assignment Recording Fee per property + \$40.00 | | | | | | | = | \$40.00 | |
| | | | | | | | SUBTOTAL: | = | \$800.00 |
| [] Small Entity Fees Apply (subtract ½ of above): | | | | | | | = | \$0.00 | |
| TOTAL FILING FEE: | | | | | | | | = | \$800.00 |

- [X] A check in the amount of \$800.00 to cover the filing fee is enclosed.
- [] The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
- [X] The Assistant Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Assistant Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: December 28, 1999

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